
THIS FORM IS VOLUNTARY AND CONFIDENTIAL
CITY OF MARIETTA/BOARD OF LIGHTS AND WATER

It is the policy of the City of Marietta/BLW to ensure equal opportunity in employment and promotion. This policy will be administered without regard to race, religion, color, national origin, marital, or veteran status, sex, age, or disability.

For equal employment opportunity (EEO) statistical data, the City/BLW requests the following information from you. Failure to complete this form will NOT affect your application for a position.

This form is not a part of the attached application for employment. This sheet will be separated by the Personnel Department and filed separately from the employment application. All information will be considered strictly private and confidential and will be used for EEO purposes only. If you prefer not to reply, leave this sheet blank. Your cooperation is appreciated. If you have questions, please contact the Personnel Department.

POSITION APPLIED FOR: _____ DATE: _____

SEX: Male () Female () Birthdate: _____

WITH WHICH ETHNIC GROUP TO YOU MOST IDENTIFY?

1. ____ White (not Hispanic origin): All persons having origins in any of the original peoples of Europe, North Africa, or the Middle East.
2. ____ Black (not Hispanic origin): All persons having origins in any of the Black racial groups of Africa.
3. ____ Hispanic: All persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race.
4. ____ Two or more races (not Hispanic or Latino)
5. ____ Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino)
6. ____ Asian (not Hispanic or Latino)
7. ____ American Indian or Alaskan Native: All persons having origins in any of the original peoples of North America, and who maintain cultural identification through tribal affiliation or community recognition.

DO YOU HAVE A DISABILITY? Yes () No ()

If yes, please describe: _____

ARE YOU A VETERAN? Yes () No ()

REFERRED BY:

____ Self	____ Walk-In	____ Job Line	____ Other*
____ Relative	____ Website *	____ Community Agency	
____ Employee	____ Newspaper*	____ Employment Service	

*Please specify: _____

AN EQUAL OPPORTUNITY EMPLOYER
